



Skagit County Auditor

\$75.00

11/1/2016 Page

1 of

3 12:56PM

Recording Requested by: Lawyers Title

When Recorded Return to:

David W. Carpenter and Colleen R. Carpenter

1305 Broadview Dr.

Anacortes, WA 98221

Prepared by:

Candace M. Wilkerson Attorney at Law

P.O. Box 45545

Seattle WA 98145

Escrow No. FMN 10317

Order No.: FMN10317

CH444410054

Assessor's Property Tax Parcel Number(s): P56971

SKAGIT COUNTY WASHINGTON REAL ESTATE EXCISE TAX 20/6 499/ NOV 01 2016

Amount Paid \$ D
Skagit Co. Treasurer
By Man Depair

## BARGAIN AND SALE DEED

THE GRANTOR, FANNIE MAE a/k/a FEDERAL NATIONAL MORTGAGE ASSOCIATION, organized and existing under the laws of The United States of America, who acquired title as FEDERAL NATIONAL MORTGAGE ASSOCIATION, residing at PO Box 650043, Dallas, TX 75265, for and in consideration of Two Hundred Seventy-Three Thousand and NO/100 Dollars (\$273,000.00) and other good and valuable consideration in hand paid, bargains, sells, and conveys to DAVID W. CARPENTER and COLLEEN R. CARPENTER, husband and wife as joint tenants with rights of survivorship, the following described real estate, situated in the County of Skagit, State of Washington:

Lot 56, "BROADVIEW ADDITION TO THE CITY OF ANACORTES," as per plat recorded in Volume 7 of Plats, page 22, records of Skagit County, Washington.

BEING the same property which MARGARET INGRAM, as her separate property, granted and conveyed to FEDERAL NATIONAL MORTGAGE ASSOCIATION, by deed dated June 16, 2015, recorded October 1, 2015, as Instrument No. 201510010093 in the Office of the Recorder of Deeds of Skagit County, State of Washington.

Commonly Known As: 1305 Broadview Dr., Anacortes, WA 98221 The words "Grantor" and "Grantee" shall be construed to read in the plural whenever the sense of this deed so requires, and, in all references herein to any parties, persons, entities or corporations, the use of any particular gender or the plural or singular number is intended to include the appropriate gender or number as the text of the within instrument may require. davos October, 2016. FANNIE MAE a/k/a FEDERAL NATIONAL MORTGAGE ASSOCIATION, organized and existing under the laws of The United States of America, who acquired title as FEDERAL NATIONAL MORTGAGE ASSOCIATION, by LAWYERS TITLE COMPANY, as Attorney-in-Fact OCINE COUNTY OF I certify that I know or have satisfactory evidence that Katherine Mullikin is the person who appeared before me, and said person acknowledged that he/she signed this instrument, on oath stated that he/she was authorized to execute the instrument and of LAWYERS TITLE acknowledged it as the Authorized Signedoin COMPANY, as Attorney-in-Fact for FANNIE MAE a/k/a FEDERAL NATIONAL MORTGAGE ASSOCIATION, organized and existing under the laws of The United States of America, who acquired title as FEDERAL NATIONAL MORTGAGE ASSOCIATION to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument. DATED: NOTARY PUBLIC in and for the State of Washington, Culyfur nic See the attacked residing at My commission expires

## CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

**CIVIL CODE § 1189** 

| A natary public or either officer completing this certificate   | verifies only the identity of the individual who signed the  |
|---|--|
| document to which this certificate is attached, and not the   | truthfulness, accuracy, or validity of that document.  |
| State of California )   |  |
| 11:00:00  |  |
| County of VIVE (See )   |  |
| on October 28, 2016 before me, Saud   | La Honica Vesino a Notary lu Here Insert Name and Title of the Officer   |
| Date Dersonally appeared Ratherive  | Here Insert Name and Title of the Officer  Utilities   |
| personally appeared   |  |
|   | Name(s) of Signer(s)   |
| subscribed to the within instrument and acknowled   | ovidence to be the person(s) whose name(s) is/are dged to me that he/she/they executed the same in /her/their signature(s) on the instrument the person(s), ed, executed the instrument. |
| of the second | certify under PENALTY OF PERJURY under the laws f the State of California that the foregoing paragraph true and correct.   |
| COMM #2131541   | ITNESS my hand and official seal.  ignature  Signature of Notary Public  |
| Place Notary Seal Above   |  |
|   | ONAL ————————————————————————————————————  |
|   | orm to an unintended document.   |
| Description of Attached Document  Fitle or Type of Document:  | Document Date:   |
| Number of Pages: Signer(s) Other Than   |  |
| Capacity(ies) Claimed by Signer(s) Signer's Name:   | Signer's Name:   |
| Corporate Officer — Title(s):   | ☐ Corporate Officer — Title(s):  |
| ☐ Partner — ☐ Limited ☐ General   | □ Partner □ Limited □ General  |
| ☐ Individual ☐ Attorney in Fact   | ☐ Individual ☐ Attorney in Fact  |
| ☐ Trustee ☐ Guardian or Conservator   | ☐ Trustee ☐ Guardian or Conservator  |
|   |  |
| ☐ Other:  | 1 Other:   |
| Other:Signer Is Representing:   | ☐ Other:Signer Is Representing:  |

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